#### **MINUTES**

# Standardization Committee Friday, May 09, 2003 @ 11:00 am Medical Board Room (2C116)

#### **PRESIDING**

Eldridge, Larry, OD

### **PRESENT**

Balog, Stephen, RN, DASS Bordner, Mary Ann, RN, CC, HES Brown, Dennis, R.T. CC Bob Ennis, Biomed, MMD Fahey, Barbara, RN, MMD Feigenbaum, Kathy, RN, Nursing Fuller, Barbara, RN, Nursing Geyer, Christopher, RN, Nursing Goldspiel, Barry, RPh, Pharmacy Lang, David, MD, Peds Peduzzi, Teresa, RN, Nursing Price, Mary, RN, Nursing Row, Chung-Hee, DLM Tarr, Linda, RN, Nursing Jerry Taylor, RN, MMD Woolery-Antill, Myra, RN, Nursing

#### **APPROVAL OF MINUTES**

Approval of the April 11, 2003 minutes was deferred to the June 13, 2003 meeting.

## **COST IMPLICATION REPORTS**

For information purpose, cost implication data sheets for seven recently approved products were distributed. (attachment)

## **OLD BUSINESS**

## **Pulse Ox Trial Report**

Mr. Brown stated that urgent clinical initiatives, such as preparations support SARS biomedical research, have preempted the pulse ox trial. Mr. Brown commented that consideration of a pulse ox recycle program should be assessed. He noted this is a worthwhile project that should be continued, and his team plans to resume at a future date. The Committee agreed to table the pulse ox trial pending notification from the Critical Care Therapy and Respiratory Care Section.

## **Inventory Review**

Ms. Fahey distributed a summary table of the status of this project. More that 60% of the 771 product review has been completed. Whereas not many products have been removed from inventory, validation has been provided for continuation of little used but necessary medical/surgical supplies. The Committee will be informed when this review is complete.

# **Avagard D Surgical Scrub Trial**

Mr. Balog reported that the Department of Anesthesia and Surgical Services has started an evaluation of Avagard D surgical scrub. This product is being considered as a means to improve the hand health for surgical staff. Mr. Balog stated that the evaluation will continue until late May, with subsequent collation of returned product evaluations, and a summary report plus recommendation to be provided to the Committee.

## Alaris Medley IV Pump Project—Guard Rails

Ms. Taylor informed the Committee that implementation of Guard Rails, the safety system for the infusion pumps, is starting soon. The Anesthesia mode and three completed drug profiles (likely to be Solid Organ, Stem Cell Transplant, Surgical Oncology) will be presented for approval at the May P&T Subcommittee. Upon approval, prior to uploading the software into infusion pumps, education and training will be provided to staff in areas that will use the Anesthesia mode and the completed drug profiles. The training will include case studies and clinical situations. Ms. Taylor stated that Guard Rails already is planned for implementation early next week in the eight infusion pumps assigned to DTM. The DTM profile development occurred as an emergent response to an ORS and per American Association of Blood Banks recommendations.

### **NEW BUSINESS**

## ACS Hi-Torque Balance Heavy Weight Guide Wire 0.014 x 300 cm for Cath Lab

Ms. Fahey requested Committee approval to place the ACS Hi-Torque Balance Guide Wire into regular inventory. This product has been special ordered in the past, but the Cath Lab reports ongoing increased usage that makes special order inconvenient. The motion was made, seconded and approved to place this product into regular inventory.

## **Medrad Continuum MRI Compatible Infusion Pump**

Ms. Taylor displayed a sample of the Medrad Continuum MRI compatible infusion system that has compatibility with scanners up to and including 1.5 Tesla. The CC has no infusion pump compatible with MRI.. The Medrad technology allows continuous infusion therapy with the IV pole and the infusion pump system in the same room as the MRI scan, and in close proximity to the patient in the MRI scan room. This infusion system is the first of its kind to receive FDA approval (February 2003) and is on the technology leading edge. Ms. Taylor distributed copies of written material, tubing samples, and the battery charger for Committee inspection. Ms. Taylor noted that each infusion pump delivers a single IV line; one system can support up to three infusion pumps on the same IV pole; a dose calculator is not a feature of this system and this upgrade is expected in early 2004; the estimated cost of the Medrad system for two infusion pumps, not including tubing, is about \$22,000. Ms. Taylor proposed a trial of this system in MRI, Anesthesia and the ICU. Ms. Daine requested that Dr. Masur, Chief CCMD, be made aware of this technology to ensure education among all ICU physicians. Mr. Balog noted that that a trial was worthwhile, especially since the operating room plans to activate an MRI scanner/operating room in Spring 2004. Mr. Goldspiel commented that the Medrad IV tubing label states that the tubing should be changed every four hours; this might not be possible with all MRI procedures. Ms. Taylor agreed to obtain more information from Medrad about this issue. The Committee agreed to explore the feasibility of a trial with MRI, Anesthesia and CCMD.

## **Boutique Kleenex Box**

Ms. Taylor reported that a boutique-sized facial tissue box is now available to the CC. Ms. Taylor recommended that the boutique size be made a regular inventory item to supplement the current rectangle-size facial tissue box. A motion was made, seconded and approved to bring the Boutique-size facial tissue box into inventory.

## Hemoccult II Sensa Test Slide and Developer-Floor Use

Ms. Taylor informed the Committee that Fecal Occult Blood (FOB) testing is a Point of Care program in the CC. CLIA has modified FOB standards such that two controls ("positive" and "negative") are needed. The current CC FOB product has only one control. Ms. Taylor recommended that the Committee approve removal of current Bayer product and introduction of the Beckman Coulter Hemoccult II Sensa Test Slide and Developer for patient care unit use. Dr. Rehak, the CC Point of Care Committee Chair has presented this information to Clinical Quality Committee, and received approval to move forward to the Medical Executive Committee as a means to educate physicians, and to this Committee. A motion was made, seconded and approved to remove Bayer and introduce Hemoccult II Sensa Test Slide in accordance with the Committee's Product Implementation Procedure

## **Hemoccult II Sensa Patient Screening Kit**

Mr. Taylor informed the Committee that the CC has no FOB patient take home kit. Beckman Coulter has a Patient Screening Kit available that can be used as a FOB patient take home kit. The kit contains a Hemoccult II Sensa Test Card, flushable collection tissues, applicator sticks, a mailing pouch, patient instructions and a colorectal cancer screening pamphlet. The Committee expressed concern over the absence of a procedure for take home FOB procedures, standard patient education. The Committee identified a need for Nutrition to be involved with FOB procedures. Dr. Rehak, the CC Point of Care Committee Chair has presented this information to Clinical Quality Committee, and received approval to move forward to the Medical Executive Committee as a means to educate physicians, and to this Committee. A motion was made, seconded and approved to use the Hemoccult II Sensa Patient Screening Kit in accordance with the Committee's Product Implementation Procedure.

## Safe Ear Curetter

Ms. Taylor presented a request from Dr. Lang, CC Pediatrician. Dr. Lang requests that the Safe Ear Curetter products be available in the CC. They are disposable, safer than stainless steel, and have a color-coded system for different age groups. They are easy to use and flexible to reduce and avoid ear canal or tympanic membrane injury. This product line consists of seven different color coded curettes each designed for a specific type of patient and cerumen condition. They will be used only by physicians, nurse practitioners and physician assistants already skilled in their use. A motion was made, seconded and approved to bring the Safe Ear Curetter into regular inventory.

## IV Change Day Labels, Heparin Flush Label, U.S.P. N.SS Label

Ms. Woolery-Antill distributed label samples that have been evaluated on 13W. IV Change Day Labels are color coded to the day that tubing change is indicated. The Committee noted that a generic white IV change label was recently approved, with usage dependent on depletion of the current 24- and 48-Hour IV label supply. Ms. Daine stated that the Clinical Quality Committee has established a sub-committee to review the issue of colored IV labels. The Committee referred the topic of IV Change Day Labels to the CQC sub-group.

Ms. Woolery-Antill distributed label samples that have been evaluated on 13W to label syringes with heparin flush (Heparin Flush Label, orange color) and normal saline (U.S.P.N.SS Label, white color). Ms. Taylor commented that the FY2004 MMD budget has made the posi-flush

system (pre-filled and pre-labeled heparin syringes and normal saline syringe) a line item. The Committee noted that until the posi-flush system is available a label system for heparin and normal saline syringes could promote patient safety. A motion was made, seconded and approved to support syringe labels for Heparin Flush and Normal Saline Flush with referral to Pharmacy on the issue of the label color and working and referral to CPC. In accord with the Product Implementation Procedure, further action on this product will be deferred pending Pharmacy and CPC recommendation.

## Gem Starr Pump by Abbott and Accessories

Ms. Taylor reported that implementation of the Gem Starr ambulatory pump system will begin 05-19-2003. The Gem Starr will replace the Abbott Aim Ambulatory pump. Ms. Taylor noted that intensive education has been ongoing to ensure product expertise among CC Nursing Trainers. Upon initial training completion, each trainer has been assigned two Gem Starr pumps and a manufacture manual. Trainers then in service staff in their respective areas. For the Committee inspection, Ms. Taylor circulated samples of the new pump, bolus cord, narcotic lock box, and IV pole clamp. Ms. Taylor informed the Committee that poster boards are being developed that display the IV tubing changes and the IV tubing products that will remain unchanged. Electronic training tools will be developed from the poster boards for circulation by Nursings' PPD; patient teaching booklets will be available in English and Spanish, with French and Vietnamese versions expected in the future. The cost per pump is \$5000. Mr. Ennis stated that proper care of the bolus cord is critical. The bolus cord needs to be disconnected from the pump when the pump is not in use; the bolus cord should never be wrapped around the pump as this can kink and damage the cord.

## Hill-Rom Advanta Bed Seizure Pads

Ms. Taylor announced the purchase of Hill-Rom Advanta bed seizure pads; a set of seizure pads was circulated for Committee inspection. This purchase promotes patient safety, decreases fall risk, and is congruent with JCAHO standards. Two sets of pads are stationed on 5W; one set is stocked on the CHS Emergency Night Cart; and three sets are stocked in Biomed. The Hill-Rom Advanta bed is the standard CC med/surg bed. The Hill-Rom Advanta seizure pads will not fit the ICU beds nor the behavior health beds. Ms. Taylor noted that Biomed carries the seizure pads for the ICU Total Care and Sp0<sub>2</sub>RT beds; new beds are planned for Behavior Health in the FY2004 budget.

## **Surgical Skin Markers**

Ms. Daine requested Committee consideration of a surgical skin marker. Surgical skin markers are a regular inventory item, but the mark does not come off easily, and an alternative should be considered for markings on visible body areas, such as the face. The Committee noted that this topic was not on the agenda, and requested Mr. Balog, Ms. Daine, and Ms. Peduzzi to coordinate discussion and recommendation for presentation at the June 2003 meeting.

#### OCCURENCES OF NOTE

No occurrences were reported.

## **NEXT MEETING**

JUNE 13, 2003 @ 11:00AM, ROOM 2C116, MEDICAL BOARD ROOM